r		-						SERIAL NO.				FILING DATE			
MULTIPLE DEPENDENT CLAIM FEE CALCULATI N SHEET								APPLICANT(S)							
							CLAIMS	L							
	AS FILED		APTE	AFTER 18T AMENDMENT		AFTER 2ND AMENDMENT			-		<u> </u>		<u> </u>		
	en D	DEP	IND	DEP	BKD	DEP	ł		MD	DEP	IND	DEP	BND .	DEP	
1			<u> </u>		}		1	51 52					 		
3	\	-/		 	!		1	53			 	 	 		
4	1	/	l	 	 		1	54							
5							1	55							
6							1	56							
7	-X			<u> </u>	 	ļ	ł	57			ļ				
8	/				-	 	ł	58							
10				 	 	 	1	59 60							
11				 			i	61							
12]	62							
13		\Box			.		ł	63							
14				 	 	 		64]			
15		,-		 		 	ł	65 66				 	 		
16 17	\vdash					 	1	67							
18]	68							
19]	69							
20						ļ	į	70				ļ			
21	$-\times$				ļ	ļ	l	71							
22		- 1					ł	72							
23 24				 	 	 		73 74							
25							1	75							
26]	76							
27				ļ		ļ	ļ	77							
28						ļ	ł	78							
29						 	•	79 80							
30 31				i	l		į	81							
32							1	82							
33							1	83							
34		·		ļ			Į	84							
35					 		j	85				-			
36 37					 		Ì	86 87							
37					l	<u> </u>	1	88							
39								89							
40							1	90			<u> </u>	 	 		
41					ļi	ļ	1	91				 			
42							ł	92				 			
43							l ·	93 94	· ·						
44 45	 							95							
46							1	96							
47								97							
48								98							
49			!			ļ.——	ł	99				 			
50	 		<u> </u>				ì	100				-			
TOTAL IND.		1 1					[TOTAL IND.	ļ				L	1	
TOTAL DEP. TOTAL	4-		•		. •] ,	DEP.				v		 ▼	
TOTAL CLAIMS	9				1		1	CLAIMS					LI		